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Official Form 1 (4/07)				oamone		90 -	01 12				
	United States Bankruptcy C Northern District of Illinois								Vol	untary	Petition
Name of Debtor (if individual, Graham, Shelley R	enter Last, First	, Middle):			Name	of Joint	Debtor (Spou	se) (Last, First	, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							e Joint Debtor d trade names		3 years		
Last four digits of Soc. Sec./Cor xxx-xx-6941	nplete EIN or o	ther Tax ID	No. (if mo	ore than one, state	e all) Last f	our digits	s of Soc. Sec./	Complete EIN	or other Ta	ax ID No. (if	more than one, state all
Street Address of Debtor (No. a: 2714 Ashland Court Rockford, IL	nd Street, City,	and State):			Street	Address	of Joint Debte	or (No. and St	reet, City, a	and State):	
			Г	ZIP Code 61101							ZIP Code
County of Residence or of the P Winnebago	rincipal Place o	of Business:		<u> </u>	Coun	ty of Resi	idence or of th	ne Principal Pl	ace of Busi	ness:	•
Mailing Address of Debtor (if d	fferent from str	reet address):		Maili	ng Addre	ss of Joint De	btor (if differe	nt from stre	eet address):	
			Г	ZIP Code							ZIP Code
Location of Principal Assets of (if different from street address		r	<u> </u>								1
Type of Debtor	•		Nature	of Business			Chapte	er of Bankru	ptcy Code	Under Whic	c h
(Check one box) ■ Individual (includes Joint Do See Exhibit D on page 2 of t □ Corporation (includes LLC a □ Partnership □ Other (If debtor is not one of the check this box and state type of	his form. and LLP) e above entities,	Singl in 11 Railre Stock Com	U.S.C. § oad storoker modity Bring Bank r Tax-Exe (Check box or is a tax-r Title 26 of the control of the cont	eal Estate as 101 (51B)	nization	☐ Cha ☐ Cha ☐ Deb defin	upter 9 upter 11 upter 12 upter 13 upter 13 upter 13 upter 11 U.S.C urred by an indi	Of Color Color Color Consumer debts	hapter 15 P a Foreign a Foreign a Foreign be of Debts k one box)		eding ecognition
Filin	Fee (Check o		(the fine)	nai Revenue		one box		Chapter 11			
■ Full Filing Fee attached □ Filing Fee to be paid in instattach signed application for is unable to pay fee except in □ Filing Fee waiver requested attach signed application for	the court's con installments. I (applicable to c	sideration c Rule 1006(l hapter 7 inc	ertifying to). See Offi	that the debto icial Form 3A. only). Must	Check	Debtor Debtor Cif: Debtor to insid Call appli A plan Accepta	is a small bus is not a small s aggregate n- ers or affiliate cable boxes: is being filed ances of the p		or as define liquidated d n \$2,190,00 lion.	d in 11 U.S. ebts (exclud)00.	C. § 101(51D). ing debts owed e or more
Statistical/Administrative Info Debtor estimates that funds		e for distrib	ution to u	nsecured cre	ditors.					FOR COURT	
☐ Debtor estimates that, after a there will be no funds availa					ve expens	es paid,					
Estimated Number of Creditors								1			
1- 50- 100 49 99 199		1000- 5,000	5001- 10,000	10,001- 25,000	25,001- 50,000	100,000 100,000					
Estimated Assets				ш			Ц				
\$0 to □ \$1	10,001 to	\$100, \$1 mi			00,001 to million	_	More than \$100 million				
Estimated Liabilities	50.001 :	D 6100	001	П ***	00.001		Mana d				
	50,001 to 100,000	□ \$100, \$1 mi			00,001 to) million		More than \$100 million				

Case 07-71211 Doc 1 Filed 05/18/07 Entered 05/18/07 08:57:25 Desc Main Page 2 of 41 Document Official Form 1 (4/07) FORM B1, Page 2 Name of Debtor(s): Voluntary Petition Graham, Shelley R (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: This district 04 B 73691 7/22/04 Location Case Number: Date Filed: Where Filed: This district 02 B 70634 2/11/02 Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.Ĉ. §342(b). \mathbf{X} /s/ WILLIAM L. BALSLEY ☐ Exhibit A is attached and made a part of this petition. May 18, 2007 (Date) Signature of Attorney for Debtor(s) WILLIAM L. BALSLEY Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? ☐ Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment)

(Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Name of Debtor(s):

Graham, Shelley R

Omciai	Form	1 (4/07)
			-

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Shelley R Graham

Signature of Debtor Shelley R Graham

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

May 18, 2007

Date

Signature of Attorney

X /s/ WILLIAM L. BALSLEY

Signature of Attorney for Debtor(s)

WILLIAM L. BALSLEY

Printed Name of Attorney for Debtor(s)

Balsley & Dahlberg, LLP

Firm Name

5130 North Second Street Loves Park, IL 61111

Address

Email: www.balsleylawoffice.com

(815) 877-2593 Fax: (815) 877-7965

Telephone Number

May 18, 2007

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{v}

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

In re	Shelley R Graham		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Official Form 1, Exh. D (10/06) - Cont.

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:		/s/ Shelley R Graham	
		Shelley R Graham	
Date:	May 18, 2007		

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Form 6-Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

In re	Shelley R Graham		Case No		
-		Debtor	,		
			Chapter	13	
			<u> </u>		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	6,905.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		6,777.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		35,622.62	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,364.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			1,931.00
Total Number of Sheets of ALL Schedu	ıles	19			
	T	otal Assets	6,905.00		
			Total Liabilities	42,399.62	

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Official Form 6 - Statistical Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

In re	Shelley R Graham		Case No.	
_		Debtor ,		
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	2,364.00
Average Expenses (from Schedule J, Line 18)	1,931.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,289.00

State the following:

State the following.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		1,377.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		35,622.62
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		36,999.62

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Form B6A (10/05)

In re	Shelley R Graham		Case No.	
		Debtor	- ,	

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
--------------------------------------	--	---	--	----------------------------

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

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Form B6B (10/05)

In re	Shelley R Graham	Case No.	_
		Debtor	

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Χ			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	LaSall	e Bank/ checking	-	5.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	Misc. I	nousehold goods and furnishings	-	1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
ó.	Wearing apparel.	Clothir	ng and personal items	-	400.00
' .	Furs and jewelry.	Χ			
3.	Firearms and sports, photographic, and other hobby equipment.	X			
).	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
0.	Annuities. Itemize and name each issuer.	X			
			(Sub-Tota (Total of this page)	al > 1,905.00

² continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

In re	Shelley R Graham	Case No.	
	<u> </u>	•	

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	Х			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	Χ			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			T)	Sub-Total of this page)	al > 0.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

In re	Shelley R Graham	Case No
_	<u> </u>	•

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	Х			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	20	00 Chevrolet Blazer	-	5,000.00
26.	Boats, motors, and accessories.	Χ			
27.	Aircraft and accessories.	Х			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	Х			
31.	Animals.	Х			
32.	Crops - growing or harvested. Give particulars.	Χ			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	Χ			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 5,000.00 (Total of this page)

Total >

6,905.00

Sheet 2 of 2 continuation sheets attached

to the Schedule of Personal Property

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Form B6C (4/07)

In re	Shelley R Graham	Case No.	
		Debtor	

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

\$136,875.

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Household Goods and Furnishings Misc. household goods and furnishings	735 ILCS 5/12-1001(b)	1,500.00	1,500.00
Wearing Apparel Clothing and personal items	735 ILCS 5/12-1001(a)	400.00	400.00
Automobiles, Trucks, Trailers, and Other Vehicles 2000 Chevrolet Blazer	735 ILCS 5/12-1001(c)	2,400.00	5,000.00

Total: 4,300.00 6,900.00

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Official Form 6D (10/06)

In re	Shelley R Graham		Case No.
_	·	Debtor	

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

_	. -		ured claims to report on this schedule D.				-	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	LIQUID	ロヨュロコロ	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. CREDIT ACCEPTANCE CORP. P.O. Box 55000 Detroit, MI 48255		-	October 2006 purchase money 2000 Chevrolet Blazer	Ť	A T E D			
			Value \$ 5,000.00				5,000.00	0.00
Account No. 19509437 HEIGHTS FINANCE COMPANY 3853 East State Street Rockford, IL 61108		_	August 2003 non purchase money household goods					
	L		Value \$ 200.00				1,527.00	1,327.00
Account No. 23194-12 ROYCE FINANCIAL 617-B S. Rockford Avenue Rockford, IL 61104		-	June 2004 non purchase money household goods					
Account No.			Value \$ 200.00				250.00	50.00
			Value \$	Sub	tota			
continuation sheets attached			(Total of the				6,777.00	1,377.00
			(Report on Summary of Sc		Tota lule		6,777.00	1,377.00

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Official Form 6E (4/07)

In re	Shelley R Graham	Case No	
_			
		Debtor	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is unliquidated. "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case

under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data. 127 1 1 12

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. \S 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).

☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Official Form 6F (10/06)

In re	Shelley R Graham	Case No	
_	·	Debtor	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	U	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	CONSIDERATION FOR CLAIM. IF CLAIM	N T I N G E N	LIQUIDA	DISPUTED	AMOUNT OF CLAIM
Account No.			loan	7	TED		
AAA COMMUNITY FINANCE 5611 N. Second Street Loves Park, IL 61111		-					5,366.07
Account No.	\dagger		collections for: Check N Go and other misc.				,
AAM, INC. 330 Georgetown Square, Suite 104 Wood Dale, IL 60191		-	accounts				471.25
Account No. ACCOUNTS RECEIVABLE MANAGEMENT 7507 N. Second Street, Unit C Machesney Park, IL 61115		-	collection for: Kurt Jensen DDS and other misc. accounts				
madicality Fair, 12 of 170							893.51
Account No. ADVANCE AMERICA 3516 East State Street Rockford, IL 61108		-	loan				243.00
7 continuation sheets attached		1	(Total of	Sub this			6,973.83

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham	Case No.	
_		Debtor	

	Lc		I I I Will I I I I I	1 -		T =	Г
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATED	1	AMOUNT OF CLAIM
Account No.			collection for: Rockford Health System & other	T	E		
ALLIED BUSINESS ACCOUNTS, INC. 300 1/2 South Second Street P.O. Box 1600 Clinton, IA 52733		-	misc. accounts				3,696.77
Account No.			Ioan				
AMERICASH LOANS 4315 East State Street Rockford, IL 61108		-					619.58
Account No.	-		collections for: OSF Medical Group and other	-		-	010.00
C.B. ACCOUNTS, INC. 1101 Main Street Peoria, IL 61606		-	misc. accounts				137.00
Account No.			loan			T	
CASH BOX, LLC 7914-A N. Second Street Machesney Park, IL 61115		-					525.75
Account No.			loan				
CASH LOAN STORE, LLC 5919 North Second Street Loves Park, IL 61111		-					1,194.57
Sheet no. 1 of 7 sheets attached to Schedule of			S	Sub	tota	ıl	0.470.07
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	6,173.67

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham	Case No.	
_		Debtor	

	_	I	usband, Wife, Joint, or Community	16	U	Ь	1
CREDITOR'S NAME,	000		Isband, Wile, Joint, of Community	C O N T	NL	DI	
AND MAILING ADDRESS INCLUDING ZIP CODE.	ODEBTOR	H W	DATE CLAIM WAS INCURRED AND	ĮΫ	Į,	S P U T E	
AND ACCOUNT NUMBER	Ī	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	Ŭ	Ĭ	AMOUNT OF CLAIM
(See instructions above.)	Ř	С	is sebseer to seron, so since.	N G E N	Ď	Þ	
Account No.			collections for: Burlington Coat Factory and other	Ť	IQUIDATED		
			misc. accounts	L	Ď	L	
CCV							
10413 Beardslee Blvd.		-					
Bothell, WA 98011							
							00.00
							38.92
Account No.			collections for: Schnuck's Markets, Family Dollar				
			and other misc. accounts				
CHEXSYSTEMS COLLECTIONS							
AGENCY		-					
7805 Hudson Rd. #100 Woodbury, MN 55125-1595							
WOOdbary, WIN 33123-1393							50.12
		L				L	30.12
Account No. 3304742044			utilities				
COMMANDA I AL TILLEDICONI COMPANIV							
COMMONWEALTH EDISON COMPANY Attention: Credit Department		L					
2100 Swift Drive							
Oak Brook, IL 60523							
,							395.08
Account No. 9038209			deficiency balance on auto loan	H			
CONSUMER PORTFOLIO SERVICES							
P.O. Box 57071		-					
Irvine, CA 92619							
							0,000,00
							6,000.00
Account No.			traffic fines				
COOK COUNTY CIDOUIT COURT							
COOK COUNTY CIRCUIT COURT		_					
50 W. Washington Chicago, IL 60602		[
5.110ag5, 12 00002							
							75.00
Sheet no. 2 of 7 sheets attached to Schedule of				Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				6,559.12

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham	Case No.	
_		Debtor	

CREDITOR'S NAME,	Ç	Ηu	sband, Wife, Joint, or Community	Ç	U	D	Т	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	NL L Q U L D A T E	SPUTED	F	AMOUNT OF CLAIM
Account No.			collections for: Insight Communications and other	T	T E			
CREDIT PROTECTION ASSOCIATION 13355 Noel Road Dallas, TX 75240		-	misc. accounts		D			230.90
Account No.			collections for Lou Bachrodt Auto Mall and other			T	T	
CREDITORS' PROTECTION SERVICE 202 W. State St, 3rd Floor P.O. Box 4115 Rockford, IL 61110		-	misc. accounts					
					L	L	\perp	875.00
Account No. CRUSADER CLINIC 1200 West State Street Rockford, IL 61102		-	medical					75.00
Account No. DENNIS BREBNER & ASSOCIATES 860 Northpoint Blvd. Waukegan, IL 60085-8211		-	collections for: Swedish American and other misc. accounts					2,197.85
Account No. GFSIL PAYLOANS 1005 Terminal Way, Suite 110 Reno, NV 89502		-	loans					
								735.00
Sheet no. <u>3</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		<u> </u>	(Total of t	Subt			T	4,113.75

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham	Case No.	
_		Debtor	

CD TD TTO DIG NA LA CT	С	Hu	sband, Wife, Joint, or Community	С	U	D	Т	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDA	ISPUTED		AMOUNT OF CLAIM
Account No.			collections for: Premier Bankcard and other misc.	Т	A T E D			
J.C. CHRISTENSEN & ASSOCIATES P.O. Box 519 Sauk Rapids, MN 56379		-	accounts					424.01
Account No.			membership fees			T	T	
LADIES WORKOUT EXPRESS c/o NFFS P.O. Box 497 Layton, UT 84041-0497		-						600.00
Account No.			collections for: City of Chicago and other misc.	T			T	
LINEBARGER, GOGGAN, BLAIR & SAMPSON P.O. Box 06152 Chicago, IL 60606-0152		-	accounts					160.00
Account No.			loan			T	t	
MCKENZIE CHECK ADVANCE OF ILINOIS 4343 East Stat eStreet Rockford, IL 61104		-						792.00
Account No.		T	collections for Household and other misc.			T	T	
MIDLAND CREDIT MANAGEMENT P.O. Box 939019 San Diego, CA 92193-9019		-	accounts					1,399.20
Sheet no4 of _7 sheets attached to Schedule of	-			Subt			T	3,375.21
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his _]	pag	ge)	L	0,070.21

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham		Case No.	_
_		Debtor	,	

	I c	Lie	ahand Wife laint or Community	ΤΩ	T	15	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LIQUID	D I S P U T E D	AMOUNT OF CLAIM
Account No.			collections for: Swedish American MSO,	٦	A T E D		
MUTUAL MANAGEMENT SERVICES 401 E. State St., 2nd Floor P.O. Box 4777 Rockford, IL 61110		-	Radiology Consultants and other misc. accounts				1,132.65
Account No.			collections for: Rockford Radiology and other				
NATIONAL ACCOUNT SYSTEMS OF MADISON P.O. Box 44207 Madison, WI 53744-4207		-	misc. accounts				357.00
Account No.	╁		collections for SBC, Bank One and other misc.	+		_	
NATIONAL ACTION FINANCIAL SERVICES 165 Lawrence Bell Drive, Suite 100 P.O. Box 9027 Williamsville, NY 14231-9027		-	accounts				823.52
Account No.			medical				
OSF COMMON BUSINESS OFFICE P.O. Box 1806 Peoria, IL 61656-1712		-					875.00
Account No.	f	\vdash	medical		T	t	
RADIOLOGY CONSULTANTS ROCKFORD P.O. Box 4542 Rockford, IL 61110		-					88.00
Sheet no. 5 of 7 sheets attached to Schedule of	_	_	,	Sub	tota	ıl	2 276 47
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	3,276.17

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham	Case No	
-		Debtor	

_	_						
CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	S	U	P	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H		CONTINGEN	UNLIQUIDA	1 E	AMOUNT OF CLAIM
Account No.			medical	Т	A T E D		
ROCKFORD HEALTH PHYSICIANS 2300 N. Rockton Avenue Rockford, IL 61103		-			D		611.57
Account No.			medical				
ROCKFORD HEALTH SYSTEMS Rockford Memorial Hospital 2400 N. Rockton Avenue Rockford, IL 61103		-					479.21
	L	╙					479.21
Account No.			medical				
ROCKFORD HEALTH SYSTEMS Rockford Clinic 2300 N. Rockton Avenue Rockford, IL 61103		-					1,001.50
Account No.	t	t	collection for: Rockford EAS and other misc.	H	\vdash	H	
ROCKFORD MERCANTILE AGENCY 2502 S. Alpine Road Rockford, IL 61108		-	accounts				407.00
Account No.	t	T	medical	T			
SWEDISH AMERICAN HOSPITAL 1401 Charles Street P.O. Box 4448 Rockford, IL 61110-0948		-					1,862.59
Sheet no. 6 of 7 sheets attached to Schedule of	_		5	Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				4,361.87

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Official Form 6F (10/06) - Cont.

In re	Shelley R Graham	Case No.	
_		Debtor	

				_			
CREDITOR'S NAME,	CO	Ηι	Isband, Wife, Joint, or Community		U N	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H		C O N T I N G E N	LIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.			medical	Т	T E		
SWEDISH AMERICAN MEDICAL GROUP 2550 Charles Street P.O. Box 1567 Rockford, IL 61110-0067		-			D		324.00
Account No.			loan				
VENTURE LOANS P.O. Box 148 Shawnee Mission, KS 66201		-					390.00
	L			_		L	390.00
Account No.			traffic fines				
WINNEBAGO COUNTY CIRCUIT CLERK Winnebago County Courthouse 400 W. State St., Traffic Div.		-					
Rockford, IL 61101							75.00
Account No.							
Account No.							
Sheet no. 7 of 7 sheets attached to Schedule of				Subt	ota	.1	700.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	789.00
			(Report on Summary of So		`ota lule		35,622.62

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Form B6G (10/05)

In re	Shelley R Graham	Case No.	
_		Debtor	

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

ontinuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

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Form	B61
(10/0	-

In re	Shelley R Graham	Case No.	
_		Debtor ,	

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

■ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CREDITOR

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Official Form 6I (10/06)

	Challey D. Craham		G N	
In re	Shelley R Graham		Case No.	
		Debtor(s)		

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Divorced RELATIONSHIP(S): child Child RELATIONSHIP(S): 6 yrs. DEBTOR SPOUSE Occupation Customer service Name of Employer NCO How long employed 1 yr. Address of Employer Rockford, IL	Debtor's Marital Status:	DEPENDENTS OF DEBTOR				
Divorced Child Cyris Cocupation Customer service Cocupation Customer service Cocupation Customer service Cyris C	Debtor's Maritar Status.			0001		
Name of Employer NCO	Divorced			S.		
Name of Employer NCO How long employed 1 yr. Address of Employer Rockford, IL	Employment:	DEBTOR		SPOUSE		
How long employed	Occupation	customer service				
Name	Name of Employer	NCO				
Name	How long employed	1 yr.				
Rockford, IL		, i				
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) \$ 2,116.00 \$ 2. Estimate monthly overtime \$ 0.00 \$ 3. SUBTOTAL \$ 2,116.00 \$ 3. SUBTOTAL \$ 2,116.00 \$ 3. SUBTOTAL \$ 4. LESS PAYROLL DEDUCTIONS a. Payroll taxes and social security \$ 421.00 \$ 5. Insurance \$ 30.00 \$ 5. C. Union dues \$ 0.00 \$ 5. C. Union dues \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE H		Rockford, IL				
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) \$ 2,116.00 \$ 2. Estimate monthly overtime \$ 0.00 \$ 3. SUBTOTAL \$ 2,116.00 \$ 3. SUBTOTAL \$ 2,116.00 \$ 3. SUBTOTAL \$ 4. LESS PAYROLL DEDUCTIONS a. Payroll taxes and social security \$ 421.00 \$ 5. Insurance \$ 30.00 \$ 5. C. Union dues \$ 0.00 \$ 5. C. Union dues \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE H	INCOME: (Estimate of avera	ge or projected monthly income at time case filed)		DEBTOR	S	POUSE
2. Estimate monthly overtime \$ 0.00 \$ \$ 3. SUBTOTAL \$ \$ 2,116.00 \$ \$ 4. LESS PAYROLL DEDUCTIONS a. Payroll taxes and social security \$ 421.00 \$ 5. Insurance \$ 30.00 \$ 5. Union dues \$ 0.00 \$ 5. O.00 \$ 5. O.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOTAL NET MONTHLY TAKE HOME PAY \$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 0.00 \$ 5. SUBTOT			\$	2,116.00	\$	N/A
4. LESS PAYROLL DEDUCTIONS a. Payroll taxes and social security b. Insurance c. Union dues d. Other (Specify): 5. SUBTOTAL OF PAYROLL DEDUCTIONS 6. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 0.00 \$ 12. Pension or retirement income 13. Other monthly income		•	\$	0.00	\$	N/A
a. Payroll taxes and social security b. Insurance c. Union dues d. Other (Specify): 5. SUBTOTAL OF PAYROLL DEDUCTIONS 5. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 0.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3. SUBTOTAL		\$	2,116.00	\$	N/A
a. Payroll taxes and social security b. Insurance c. Union dues d. Other (Specify): 5. SUBTOTAL OF PAYROLL DEDUCTIONS 5. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 0.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4 LESS PAVROLL DEDLIC	TIONS				
b. Insurance c. Union dues d. Other (Specify): \$ 0.00 \$			\$	421 00	\$	N/A
c. Union dues d. Other (Specify): \$ 0.00 \$ \$ 0.00 \$ \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS 6. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 0.00 \$ \$ 12. Pension or retirement income 13. Other monthly income		a security	\$ 		\$ 	N/A
d. Other (Specify): \$ 0.00 \$ \$ 0.00 \$ \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS 6. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 0.00 \$ \$ 173.00 \$ \$ 12. Pension or retirement income 13. Other monthly income			\$ — \$		\$	N/A
\$ 0.00 \$ 5. SUBTOTAL OF PAYROLL DEDUCTIONS \$ 451.00 \$ 6. TOTAL NET MONTHLY TAKE HOME PAY \$ 1,665.00 \$ 7. Regular income from operation of business or profession or farm (Attach detailed statement) \$ 0.00 \$ 8. Income from real property \$ 0.00 \$ 9. Interest and dividends \$ 0.00 \$ 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ 173.00 \$ 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 526.00 \$ 12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income			<u>\$</u> —		\$	N/A
6. TOTAL NET MONTHLY TAKE HOME PAY 7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits 12. Pension or retirement income 13. Other monthly income			\$		\$	N/A
7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits 5 26.00 \$ 12. Pension or retirement income 13. Other monthly income	5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$	451.00	\$	N/A
8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits 526.00 \$ 12. Pension or retirement income 13. Other monthly income	6. TOTAL NET MONTHLY	TAKE HOME PAY	\$	1,665.00	\$	N/A
8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Son's social security disability benefits 12. Pension or retirement income 13. Other monthly income	7. Regular income from opera	tion of business or profession or farm (Attach detailed statement)	\$	0.00	\$	N/A
9. Interest and dividends \$ 0.00 \$ 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ 173.00 \$ 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 526.00 \$ 12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income		•	\$	0.00	\$	N/A
that of dependents listed above \$ 173.00 \$ 11. Social security or government assistance (Specify): Son's social security disability benefits \$ 526.00 \$ 12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income	9. Interest and dividends		\$	0.00	\$	N/A
11. Social security or government assistance (Specify): Son's social security disability benefits \$ 526.00 \$ \$ 0.00 \$ 12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income				173 00	\$	N/A
(Specify): Son's social security disability benefits \$ 526.00 \$ \$ 0.00 \$ \$ 12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income			Ψ	170.00	Ψ	14,71
\$ 0.00 \$ 12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income			\$	526.00	\$	N/A
12. Pension or retirement income \$ 0.00 \$ 13. Other monthly income	<u></u>		\$		\$	N/A
13. Other monthly income	12. Pension or retirement inco	ome	\$ 		\$	N/A
(2.15.)			T		T	
	•		\$	0.00	\$	N/A
\$ 0.00 \$			\$		\$	N/A
14. SUBTOTAL OF LINES 7 THROUGH 13 \$ 699.00 \$	14. SUBTOTAL OF LINES 7	THROUGH 13	\$	699.00	\$	N/A
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$\ \begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			\$	2,364.00	\$	N/A
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals	¥ <u> </u>		· · · · · · · · · · · · · · · · · · ·	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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Official Form 6J (10/06)

In re	Shelley R Graham		Case No.	
		Debtor(s)		

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and t filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate		mily at time case
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Compexpenditures labeled "Spouse."	olete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	500.00
a. Are real estate taxes included? Yes No _X_		
b. Is property insurance included? Yes No _X_		
2. Utilities: a. Electricity and heating fuel	\$	0.00
b. Water and sewer	\$	0.00
c. Telephone	\$	0.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	450.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	50.00
7. Medical and dental expenses	\$	200.00
8. Transportation (not including car payments)	\$	250.00 125.00
 Recreation, clubs and entertainment, newspapers, magazines, etc. Charitable contributions 	\$ \$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	Φ	0.00
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	100.00
d. Auto	\$ 	56.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	· 	
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	· -	
plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
d. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Personal care items and grooming	\$	100.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and	, [\$	1,931.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	, [•]	1,331.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
Utilities are included in rent.		
20. STATEMENT OF MONTHLY NET INCOME	_	
	\$	2,364.00
a. Average monthly income from Line 15 of Schedule Ib. Average monthly expenses from Line 18 above	\$ ———	1,931.00
c. Monthly net income (a. minus b.)	\$	433.00
	· —	

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Official Form 6-Declaration. (10/06)

United States Bankruptcy Court Northern District of Illinois

In re	Shelley R Graham			Case No.	
	•		Debtor(s)	Chapter	13
	DECLARATION C DECLARATION UNDER P		IING DEBTOR'S SO	CHEDULI	
	I declare under penalty of perjury th 21 sheets [total shown on summary page knowledge, information, and belief.				
Date	May 18, 2007	Signature	/s/ Shelley R Graham Shelley R Graham Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Official Form 7 (04/07)

United States Bankruptcy Court Northern District of Illinois

In re	Shelley R Graham		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$9,000.00	2007
\$28,000.00	2006
\$26,000.00	2005

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$173.00 Monthy child support payments.

\$526.00 Son's monthly social security disability payments to begin in June 2007.

\$9,000.00 Received 401K distribution in July 2006.

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS AMOUNT STILL DATES OF OF CREDITOR **PAYMENTS** AMOUNT PAID **OWING**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL **TRANSFERS OWING TRANSFERS**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT STILL AMOUNT PAID

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT STATUS OR COURT OR AGENCY NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED CASH BOX, LLC 7914-A N. Second Street

Machesney Park, IL 61115

DATE OF SEIZURE 2007

DESCRIPTION AND VALUE OF **PROPERTY** wage garnishment \$1270.00

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER CONSUMER PORTFOLIO SERVICES P.O. Box 57071 Irvine, CA 92619 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 7-06 repossession

DESCRIPTION AND VALUE OF PROPERTY 2001 Pontiac Grand Prix value \$10,000.00

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF ASSIGNMENT

NAME AND ADDRESS OF ASSIGNEE AS

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None Li

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

PROPERTY LOCATION OF PROPERTY

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15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 3036 LaSalle Avenue Rockford, IL

NAME USED same

DATES OF OCCUPANCY

5

11-03 to 4-04

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DATE OF NOTICE

ENVIRONMENTAL

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18 . Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

I.D. NO. ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

6

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	May 18, 2007	Signature	/s/ Shelley R Graham
			Shelley R Graham
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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In re	Shelley R Graham		Case No.	
		Debtor(s)	Chapter	13

	DISCLOSURE OF COMPENSATION OF ATTORN	EY FOR	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am compensation paid to me within one year before the filing of the petition in bankruptcy, on the benchmark of the debtor(s) in contemplation of or in connection with the bankruptcy.	r agreed to be	paid to me, for services rend	
	For legal services, I have agreed to accept	\$	3,000.00	
	Prior to the filing of this statement I have received	\$	0.00	
	Balance Due	\$	3,000.00	
2.	\$274.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation with any other person un	less they are r	nembers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the co			irm. A
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determ b. Preparation and filing of any petition, schedules, statement of affairs and plan which m c. Representation of the debtor at the meeting of creditors and confirmation hearing, and d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption agreements and applications as needed; preparation and filing of motions of liens on household goods.	nining whether ay be required any adjourned planning; pr	r to file a petition in bankrupted; hearings thereof; eparation and filing of reaff	irmation
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following se Representation of the debtors in any dischargeability actions, judicial lien other adversary proceeding.		relief from stay actions or a	any
	CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agreement or arrangement for pas bankruptcy proceeding.	yment to me f	or representation of the debtor	r(s) in
Da	ated: May 18, 2007 /s/ WILLIAM L. BALS	SLEY		
	WILLIAM L. BALSLE	Υ		•
	Balsley & Dahlberg, 5130 North Second S			
	Loves Park, IL 6111			
	(815) 877-2593 Fax	: (815) 877-7	' 965	
	www.balsleylawoffice	c.com		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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B 201 (04/09/06)

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

WILLIAM L. BALSLEY	X /s/ WILLIAM L. BALSLEY	May 18, 2007
Printed Name of Attorney	Signature of Attorney	Date
Address:		
5130 North Second Street		
Loves Park, IL 61111		
(815) 877-2593		
Ce I (We), the debtor(s), affirm that I (we) have rece	ertificate of Debtor ived and read this notice.	
Shelley R Graham	X /s/ Shelley R Graham	May 18, 2007
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

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United States Bankruptcy Court Northern District of Illinois

		Northern District of Illinois		
In re	Shelley R Graham		Case No.	
		Debtor(s)	Chapter 13	
	VERIF	TICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	40
	The above-named Debtor(s) her	eby verifies that the list of cred	itors is true and correct to the	he best of my
	(our) knowledge.			ic cest of my

AAA COMMUNITY FINANCE 5611 N. Second Street Loves Park, IL 61111

AAM, INC. 330 Georgetown Square, Suite 104 Wood Dale, IL 60191

ACCOUNTS RECEIVABLE MANAGEMENT 7507 N. Second Street, Unit C Machesney Park, IL 61115

ADVANCE AMERICA 3516 East State Street Rockford, IL 61108

ALLIED BUSINESS ACCOUNTS, INC. 300 1/2 South Second Street P.O. Box 1600 Clinton, IA 52733

AMERICASH LOANS
4315 East State Street
Rockford, IL 61108

C.B. ACCOUNTS, INC. 1101 Main Street Peoria, IL 61606

CASH BOX, LLC 7914-A N. Second Street Machesney Park, IL 61115

CASH LOAN STORE, LLC 5919 North Second Street Loves Park, IL 61111

CCV 10413 Beardslee Blvd. Bothell, WA 98011

CHEXSYSTEMS COLLECTIONS AGENCY 7805 Hudson Rd. #100 Woodbury, MN 55125-1595

COMMONWEALTH EDISON COMPANY Attention: Credit Department 2100 Swift Drive Oak Brook, IL 60523

CONSUMER PORTFOLIO SERVICES P.O. Box 57071 Irvine, CA 92619

COOK COUNTY CIRCUIT COURT 50 W. Washington Chicago, IL 60602

CREDIT ACCEPTANCE CORP. P.O. Box 55000 Detroit, MI 48255

CREDIT PROTECTION ASSOCIATION 13355 Noel Road Dallas, TX 75240

CREDITORS' PROTECTION SERVICE 202 W. State St, 3rd Floor P.O. Box 4115 Rockford, IL 61110

CRUSADER CLINIC 1200 West State Street Rockford, IL 61102

DENNIS BREBNER & ASSOCIATES 860 Northpoint Blvd. Waukegan, IL 60085-8211

GFSIL PAYLOANS 1005 Terminal Way, Suite 110 Reno, NV 89502

HEIGHTS FINANCE COMPANY 3853 East State Street Rockford, IL 61108

J.C. CHRISTENSEN & ASSOCIATES P.O. Box 519 Sauk Rapids, MN 56379

LADIES WORKOUT EXPRESS c/o NFFS P.O. Box 497 Layton, UT 84041-0497

LINEBARGER, GOGGAN, BLAIR & SAMPSON P.O. Box 06152 Chicago, IL 60606-0152

MCKENZIE CHECK ADVANCE OF ILINOIS 4343 East Stat eStreet Rockford, IL 61104

MIDLAND CREDIT MANAGEMENT P.O. Box 939019 San Diego, CA 92193-9019

MUTUAL MANAGEMENT SERVICES 401 E. State St., 2nd Floor P.O. Box 4777 Rockford, IL 61110

NATIONAL ACCOUNT SYSTEMS OF MADISON P.O. Box 44207 Madison, WI 53744-4207

NATIONAL ACTION FINANCIAL SERVICES 165 Lawrence Bell Drive, Suite 100 P.O. Box 9027 Williamsville, NY 14231-9027

OSF COMMON BUSINESS OFFICE P.O. Box 1806 Peoria, IL 61656-1712

RADIOLOGY CONSULTANTS ROCKFORD P.O. Box 4542 Rockford, IL 61110

ROCKFORD HEALTH PHYSICIANS 2300 N. Rockton Avenue Rockford, IL 61103

ROCKFORD HEALTH SYSTEMS Rockford Memorial Hospital 2400 N. Rockton Avenue Rockford, IL 61103

ROCKFORD HEALTH SYSTEMS Rockford Clinic 2300 N. Rockton Avenue Rockford, IL 61103

ROCKFORD MERCANTILE AGENCY 2502 S. Alpine Road Rockford, IL 61108

ROYCE FINANCIAL 617-B S. Rockford Avenue Rockford, IL 61104

SWEDISH AMERICAN HOSPITAL 1401 Charles Street P.O. Box 4448 Rockford, IL 61110-0948

SWEDISH AMERICAN MEDICAL GROUP 2550 Charles Street P.O. Box 1567 Rockford, IL 61110-0067

VENTURE LOANS P.O. Box 148 Shawnee Mission, KS 66201

WINNEBAGO COUNTY CIRCUIT CLERK Winnebago County Courthouse 400 W. State St., Traffic Div. Rockford, IL 61101